

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

Attachment 3.1-A

Page 9

PERSONAL CARE

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY.

24. Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary.

a. Transportation

- ☒ Provided
- ☐ No Limitations
- ☒ With Limitations*
- ☐ Not Provided

b. Services of Christian Science nurses.

- ☐ Provided
- ☐ No Limitations
- ☐ With Limitations
- ☒ Not Provided

c. Care and services provided in Christian Science sanatoria.

- ☐ Provided
- ☐ No Limitations
- ☐ With Limitations
- ☒ Not Provided

d. Nursing facility services for patients under 21 years of age.

- ☒ Provided
- ☐ No Limitations
- ☒ With Limitations*
- ☐ Not Provided

e. Emergency hospital services.

- ☒ Provided
- ☐ No Limitations
- ☒ With Limitations*
- ☐ Not Provided

* Description provided on attachment.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

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Attachments 3.1-A

Page 10

PERSONAL CARE

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25. Home and Community Care for Functionally Disabled Elderly Individuals, as defined, described and limited in Supplement 2 to Attachment 3.1-A, and Appendices A-G to Supplement 2 to Attachment 3.1-A.

 Provided X Not Provided

26. Personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded or institution for mental disease that are (A) authorized for the individual by a physician in accordance with a plan of treatment, (B) provided by an individual who is qualified to provide such services and who is not a member of the individual's family, and (C) furnished in a home.

 X Provided, X State Approved (Not Physician) Service Plan Allowed.
 Not Provided X Services Outside the Home Also Allowed
 X Limitations Described on Attachment

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

Supplement 2 to
Attachments 3.1-A and 3.1-B

Page 13

PERSONAL CARE

24. a. **Transportation**
Prior authorization may be required for transportation by ambulance, common carrier or other appropriate means.
- d. **Nursing Facility Services Under 21 Years**
Precertification required prior to authorization of benefits.
- e. **Emergency Hospital Services**
Limited to Medicare deductible

26. **Personal Care Services**

Personal care services are available to assist an eligible individual to perform activities of daily living (ADLs) and instrumental activities of daily living (IADLs) in the individual's home or community. The following family relationships, spouse of a member or parents of a minor child, are excluded from providing personal care services for reimbursement by Medicaid.

Personal care services are services provided in the recipient's home or in the community. Personal care services in the form of assistance with ADLs and IADLs also are available outside the home to eligible disabled individuals who require assistance to obtain and retain competitive employment of at least 40 hours a month. Assistance outside the home may be provided as necessary to assist the individual to and from work, at the work site and in locations for obtaining employment such as employment agencies, human resources offices, accommodation preparation appointments and job interview sites. Personal care services provided outside the home to individuals, for other than employment, may not exceed twenty (20) hours per month. A registered nurse currently licensed in West Virginia provides supervision of direct-care staff and develops the plan of care. All direct-care staff must be certified by an approved training program. Direct-care staff must receive basic training of at least eight (8) hours prior to rendering care. Curricula topics must include CPR, First Aide, Abuse, Neglect and Exploitation topics. Within twelve (12) months of the beginning date of employment, these individuals must receive at least twenty-four (24) hours of additional training. All direct-care staff must have initial and continuing approved training. See Personal Care Services Manual, 517 at: www.wvdhhr.org then medical services/Manual.

Initial determination of need criteria for personal care services shall be based on the West Virginia Department of Health and Human Resources Pre-Admission Screening for Nursing Facility and Community Based Services. The Pre-Admission screen must be signed by a physician indicating level of care required and be accompanied by a registered nurse's plan of care. A personal care nursing assessment must be completed at least once every six months.

For individuals receiving personal care services on an on-going basis, recertification through completion of the screen requiring physician authorization and signature must be completed at least annually.

Personal care services are limited on a per unit, per month basis (15 minutes per unit) with all services subject to prior authorization. Individuals can receive up to a maximum of 840 units (210 hours) each month.

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State: West Virginia

Supplement 2 to Attachment 3.1-A and 3.1-B

Page 14

PERSONAL CARE

Personal Care agencies must be certified for the provision of personal care prior to initiating services. The West Virginia Specialized Family Care Program may provide personal care services to members who meet the requirements of its program. All providers agree to abide by applicable federal and state laws, policy manuals, policy changes and other documents that govern this program. Agencies must be certified by the Medicaid agency in order to serve as personal care providers. Agencies must perform, but are not limited to the following activities:

1. Complete criminal background checks on all employees which are to be maintained in the individual's personnel file;
2. Conduct initial and on-going in-home aide training;
3. Monitor quality of care;
4. Ensure that direct care staff work under the supervision of a registered nurse
5. Agree to subject themselves, their staff, and all records that pertain to member services to audit, desk review, or other service evaluation that ensures compliance with billing regulations and program goals.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

Attachments 4.19-B

Page 15

PERSONAL CARE

4.19 Payments for Medical and Remedial Care and Services

Methods and Standards for Establishing Payment Rates

(iv) Meal - \$3.00 per meal during travel time.

Lodging - the most economical resources available recommended by the medical facility at destination.

26.

Personal Care Services

Reimbursement for personal care services will be fee-for-service based on units of service authorized in the approved plan of care. A unit is fifteen (15) minutes. Reimbursement is \$3.38 per unit. Payment for personal care services under the State Plan will not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. Medicaid will be the payer of last resort. Except as otherwise noted in the plan, the state developed fee schedule rate is the same for both governmental and private providers.

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